Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0710202	LYMAN MEMORIAL HIGH SCHOOL				NTNC	670	L	GW
Local Address (v	vhere applicable)	Service	vice Residen		Commercia	al Industri	al Combine	ed Agricultural
917 EXETER ROA	AD.	Connections	1					

Towns Served: LEBANON			
Monitoring	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 0060	00)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		Complete
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Disinfectant Byproducts - TTHM & HAA5 (DBP)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
COPY ROOM (MW006)	1/1/18 - 12/31/18	9/1-9/30	Complete
	1/1/19 - 12/31/19	9/1-9/30	
	1/1/20 - 12/31/20	9/1-9/30	
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/17 - 12/31/19	6/1-9/30	
	1/1/20 - 12/31/22	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: LYMAN MEMORIAL TREATMENT PLAN	NT (WSF ID: 00700)		
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
LYMAN MEMORIAL TP ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		·
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
LYMAN MEMORIAL TP ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		•
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
LYMAN MEMORIAL TP ENTRY POINT (3)	1/1/17 - 12/31/19		
\	1/1/20 - 12/31/22		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section									
Water Quality Monitoring and Compliance Schedule									
PWS ID	PWS Name			Cla	Classification Population Owner Type Primary			Primary Sou	urce
CT0710202	LYMAN MEMORIAL HIGH SCHOOL				NTNC	670	L	GW	
Local Address (v	where applicable)	Service	Residential Commerc		Commerci	al Industri	al Combine	ed Agricultu	ural
917 EXETER ROA	AD	Connections	1						

Monitoria	ng Requirements			
Water System Facility: LYMAN MEMORIAL TREATMENT P	LANT (WSF ID: 00700)			
Organic Chemicals (VOCS)		1 routine (RT) per year		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
LYMAN MEMORIAL TP ENTRY POINT (3)	1/1/18 - 12/31/18		Complete	
	1/1/19 - 12/31/19			
	1/1/20 - 12/31/20			

Mo	nthly Water System Facility ((WSF) Lev	el Monitori	ng Requiremei	nts
Vater System Facility:	LYMAN MEMORIAL TREATMENT PL	ANT (WSFIE): 00700)		
Analyte	Monitoring Requirement (Summary T	ype)	Operating Limit	i .	Samples Req/Month
Chlorine	Entry Point RDC (EPRD)		Minimum: 0.2	MG/L	Continuous
Start Date: 9/1/2011		Compliance	History:	Operating Limit	Monitoring
		Monitoring	Period	Compliance Status:	Compliance Status:
		11/1/2018 -	11/30/2018	Υ	Υ
		12/1/2018 -	12/31/2018	Υ	Υ
		1/1/2019 - 1	/31/2019	Υ	Υ
		2/1/2019 - 2	/28/2019	Υ	Υ
		3/1/2019 - 3	/31/2019	Υ	Υ
		4/1/2019 - 4	/30/2019		

Other Compliance Schedules

Compliance Schedule Activity

CROSS CONNECTION SURVEY REPORT

3/1/2019

CROSS CONNECTION SURVEY REP	OKI	3/ 1	1/2019				
	Water System Facili	ty and Sampling P	oint In	ventor	у		
Water System Water System Facility Facility ID	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule		Asbestos	Stage WQP 2 DBPR
00600 DISTRIBUTION SYSTEM	1 4	DISTRIBUTION SYSTEM	А	Υ			
	DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
	MW001	MENS ROOM	Α	Υ	N		
	MW003-C	KITCHEN BY COFFEE	Α	Υ	N		
	MW003-SW	KITCHEN SINK WEST	Α	Υ	N		
	MW006	COPY ROOM	Α	Υ	N		Υ
	MW027-123	ROOM 123	Α	Υ	N		
	MW027-L	LIBRARY	Α	Υ	N		
	MW028-TEA	TEACHERS LOUNGE	Α	Υ	N		
	MW031-BR	CUSTODIAL BATHROOM	Α	Υ	N		
	MW031-S	CUSTODIAL SINK	Α	Υ	N		
	MW039-MA	MAIN OFFICE	Α	Υ	N		
	MW040	ANIMAL LAB SINK	Α	Υ			
	MW041	MENS RM AG STATION	Α	Υ			

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section								
Water Quality Monitoring and Compliance Schedule								
PWS ID	S ID PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0710202	10202 LYMAN MEMORIAL HIGH SCHOOL				NTNC	670	L	GW
Local Address (v	where applicable)	Service	Residential		Commerci	al Industria	al Combine	ed Agricultural

Connections

1

Towns Served: LEBANON

917 EXETER ROAD

	Water 9	System Facili	ty and Sampling Po	oint lı	nventoi	ſy			
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	WQP .	Stage 2 DBPR
		MW042	WOMENS RM AG STATION	Α	Υ				
		MW043	CARPENTER SINK	Α	Υ				
		MW044	ROOM 101	Α	Υ				
		MW045	ROOM 106	Α	Υ				
		MW046	HORTICULTURE ROOM 10	Α	Υ				
		MW047	ROOM 113	Α	Υ				
		MW048	HANDICAP BATH NEXT T	Α	Υ				
		MW049	HEALTH OFFICE	Α	Υ				
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700	LYMAN MEMORIAL TREATMENT PLANT	3	LYMAN MEMORIAL TP EN	Α					
10310	WELL 3	2	WELL 2	Α					
10311	WELL 1	2	WELL 1	Α					
54534	ATMOSPHERIC STORAGE								
54536	PRESSURE STORAGE								

54536 PRESSURE STORAGE								
Certified Operator Information								
Water System Facility: LYMAN	MEMORIAL TREATMENT P	LANT (WSF ID: 00700)						
Facility Classification: CLASS 1 TRE	ATMENT PLANT			Certification				
Operator Name	Operator Type	Certification(s)		Expiration				
LAFRAMBOISE, PAUL F.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPER	RATOR - CLASS I	9/30/2021				
		WATER TREATMENT PLANT	WATER TREATMENT PLANT OPERATOR - CLASS II					
Contact Information								
Name	Organ	Organization Job Title						

lailing Address Line Two Mobile Phone		City Lebanon	State	Zip Code	
Mohile Phone		Lebanon	СТ		
Mohile Phone			CT	06249	
WIODIIC I HOHE	Emergency Phone	Email Address			
89	860-642-7795	janet.tyler@lebanonct.org			
Organization			Job Title		
Lebanon Pub	lic Schools	Superinte	ndant		
lailing Address Line Two		City	State	Zip Code	
		Lebanon	СТ	06249	
Mobile Phone	Emergency Phone	Email Address			
89	860-642-7795	robert.angeli@lebanonct.org			
1:	Organization Lebanon Pub ailing Address Line Two Mobile Phone	Organization Lebanon Public Schools ailing Address Line Two Mobile Phone Emergency Phone	Organization Lebanon Public Schools Superinter ailing Address Line Two City Lebanon Mobile Phone Emergency Phone Email Address	Organization Job Title Lebanon Public Schools Superintendant ailing Address Line Two City State Lebanon CT Mobile Phone Emergency Phone Email Address	

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID PWS Name Classification Population Owner Type Primary Sour NTNC 670 L GW Local Address (where applicable) Service Residential Commercial Industrial Combined Agriculture Statement of the Connections 1			21001 2001109 1 1011100		- 1		<i>-</i>			
Local Address (where applicable) Service Residential Commercial Industrial Combined Agriculture Commercial Commercial Industrial Combined Agriculture	Р١	PWS ID PWS Name			Cla	ssification	Population	Owner Type	Primary Source	
Connections	C	CT0710202 LYMAN MEMORIAL HIGH SCHOOL					NTNC	670	L	GW
917 EXETER ROAD Connections 1	Lo	ocal Address (w	here applicable)	Service	Resider	itial	Commerci	al Industri	al Combine	ed Agricultural
	9:	17 EXETER ROA	AD .	Connections	1					

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Pri	mary Source
CT0710212	LEBANON ELEMENTARY SCHOOL				NTNC	525	L		GW
Local Address (w	here applicable)	Service	Resider	ntial	Commercia	al Industri	al Combir	ned	Agricultural
479 EXETER ROA	AD.	Connections			2				

Towns Served: LEBANON			<u> </u>
Monitorin	g Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00	0600)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		10 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/17 - 12/31/19	6/1-9/30	
	1/1/20 - 12/31/22	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Arsenic (1005)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		·
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

T0710212	LEBANON ELEMENTARY SCHOOL	NTNC	525	L	GW					
PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source					
	Water Quality Monitoring and Con	npliance S	Schedul	e						
	Connecticut Department of Public Health Drinking Water Section									

Connections

Residential Commercial

2

Industrial

Agricultural

Combined

Service

Towns Served: LEBANON

479 EXETER ROAD

Local Address (where applicable)

Monitoring Requirements								
Water System Facility: ENTRY POINT (WSF ID: 00700)								
Organic Chemicals (VOCS) 1 routine (RT) per qua								
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status					
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete					
	1/1/19 - 3/31/19							
4/1/19 - 6/30/19								
7/1/19 - 9/30/19								

Other Compliance Schedules

Compliance Schedule Activity

Due Date

Achieved Date

CROSS CONNECTION SURVEY REPORT 3/1/2019

Public Notification Requirements									
	Compliance Notice <u>Public Notification</u> <u>PN Cer</u>					<u>fication</u>			
Violation/Situation	Period	Tier	Required	Performed	Due to DPH	Received			
E. Coli	4/1/16 - 6/30/16	3	11/7/2017		11/17/2017				
Arsenic M&R Violation	4/1/18 - 6/30/18	3	8/27/2019		9/6/2019				

7 11 3 0 1 11 0 1 1 1	TOTAL VIOLACION	1/ =/	10 0/30/10 3	0/2//2	013		3/0/2013	
	Wat	er System Facili	ity and Sampling P	oint Ir	vento	ſy		
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule		Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	GENERIC DISTRIBUTION	Α	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		MW001	KITCHEN SINK	Α	Υ	3	Υ	
		MW002	NURSES OFFICE	Α	Υ	3		
		MW003	BOYS RM 66 WING L	Α	Υ	3		
		MW004	STAFF ROOM	Α	Υ	3		
		MW005	FOUNTAIN 56 WING	Α	Υ	3		
		MW006	KITCHEN POT SINK	Α		3		
		MW007	GIRLS RM 56 WING R14	Α		3		
		MW008	GIRLS RM 66 WING L	Α		3		
		MW009	GIRLS RM NEAR CAFE	Α		3		
		MW010	BOYS RM NEAR CAFE	Α		3		
		MW011	GIRLS RM NEAR CAFE	Α		3		
		MW012	BOYS RM NEAR OFFICE	Α		3		
		MW013	BOYS 56 WING RM14	Α		3		
		MW014	BOYS RM 66 WING U	Α		3		
		MW015	GIRLS RM 66 WING U	Α		3		
		MW016	BOYS 56 WING RM 12	Α		3		
		MW017	GIRLS 56 WING RM 12	Α		3		
		MW018	FOUNTAIN NEAR OFFICE	Α		3		
		MW019	FOUTAIN 66 WING	Α		3		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

		_								
	Connectic	ut Depai	rtment of	Public	Health	Drin	iking	Water S	Section	
	Wat	ter Qual	ity Monit	oring a	nd Com	plia	nce S	chedule		
PWS ID	PWS Name									Primary Source
CT0710212	LEBANON ELEM	ENTARY SCH	OOL			NTI		525	L	GW
Local Address (w	here applicable)			Service	Residenti	al Co	mmercial	Industrial	Combined	Agricultura
479 EXETER ROA	D			Connection	IS		2			_
Towns Served: LI	EBANON									
		Water Sy	stem Facil	ity and Sa	ampling I	Point	Inven	itory		
Water							Tot	al Lead ai	nd	
System Wate	r System Facility	S	Sampling Point	Sampling P	oint		Colife	orm Coppe	er	Stage
Facility ID			ID	Description		Sta	tus Ru	le Rule Ti	ier Asbestos	WQP 2 DBP
			MW020	KITCHEN HA	AND SINK	A	١	3		
			UPSTREAM	WITHIN 5 SI	ERVICE CON	Α	١			
00700 ENTR	Y POINT		3	ENTRY POIN	I T	A	١			
52911 WELL	1		2	WELL 1		Α	١			
52913 WELL	2		2	WELL 2		Α	١			
			Certified	Operato	r Informa	ation				
Water System I	acility: DISTR	IBUTION SY		<u> </u>						
Facility Classifica	ntion: SMALL WA	ATER SYSTEM								Certification
Operator Name			Operator Typ	е	Certification	(s)				Expiration
LAFRAMBOISE, P	AUL F.		CHIEF OPERATO	OR I	R DISTRIBUTION SYSTEM OPERATOR - CLASS I					9/30/2021
,				,	WATER TREA	TMEN	T PLANT	OPERATOR -	CLASS II	9/30/2021
LAFRAMBOISE, J	EFFREY		ASSIGNED OPE	RATOR	DISTRIBUTIO	N SYST	ГЕМ ОРЕ	RATOR - CLA	SS I	12/31/2020
			Con	tact Info	rmation					
Name				rganization					Job Title	
Ms. Janet M. Tyl	er			ebanon Public	c Schools			Superintend	dent	
Mailing Address			Mailing Addres	s Line Two				City	State	Zip Code
891 Exeter Road							Lebanor	•	СТ	06249
Business Phone	e Extension	Fax	Mobi	ile Phone	Emergency F	Phone	Email Ad	ddress		
860-642-7795		860-642-4			860-642-7			er@lebanon	ct.org	
Contact Role(s):		1					, - /	-		
Name			0	rganization					Job Title	
Ms. Betsy Petrie				own of Leban	on			First Selectr	man	
Mailing Address			Mailing Addres	s Line Two				City	State	Zip Code
579 Exeter Road							Lebanor	•	СТ	06249
Business Phone	e Extension	Fax	Mobi	ile Phone	Emergency F	Phone	Email Ad	ddress		
860-642-6100		860-642-7						@lebanontov	vnhall.org	
Contact Role(s):							-			
Name			0	rganization					Job Title	
Mr. Kevin Frencl	1			ebanon Publi	c Schools			Facilities Di	rector	

Zip Code

06249

State

CT

City

kevin.french@lebanonct.org

Lebanon

Emergency Phone Email Address

860-466-9961

Mailing Address Line Two

Mobile Phone

Mailing Address Line One

Extension

Contact Role(s): Administrative Contact

Fax

860-642-4589

891 Exeter Road

Business Phone

860-642-5742

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

	Tracer Quarrey 1.10111c	u 0011	TP.	indirec t	onoaa			
PWS ID PWS Name			Classification		Population	Owner Type	Primary Source	
CT0710212 LEBANON ELEMENTARY SCHOOL					NTNC	525	L	GW
Local Address (where applicable)		Service	Resider	tial Commerci		al Industri	al Combine	ed Agricultural
479 EXETER ROAD		Connections			2			

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health	Drinking	g Water	Section	
Water Quality Monitoring and Con	npliance S	Schedul	.e	
DIAIC No. 11	Cl:f:+:	Daniel Latine	O	Dutine

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0710283	RED SNEAKERS				NTNC	34	Р	GW
Local Address (v	vhere applicable)	Service	Resider	ntial	Commerci	al Industri	al Combin	ed Agricultural
312 VILLAGE HIL	L ROAD	Connections	1		1			

Towns Served: LEBANON			
Monitoring I	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 0060	00)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		Complete
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/16 - 12/31/18	6/1-9/30	Complete
	1/1/19 - 12/31/21	6/1-9/30	
	1/1/22 - 12/31/24	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/20		
	1/1/21 - 12/31/23		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

	Connecticut Department of Water Quality Monito					,			
PWS ID	PWS ID PWS Name Classification Population Owner Type Primary Source							Primary Source	
CT0710283	RED SNEAKERS				NTNC	34	Р	GW	
Local Address (v	where applicable)	Service	Residen	tial	Commerci	al Industri	al Combine	ed Agricultural	
312 VILLAGE HILL ROAD Connections 1 1									
Towns Served: L	owns Served: LEBANON								

Other	Compliance Schedules		
Compliance Schedule Activity	Due Date	Achieved Date	
CROSS CONNECTION EXEMPTION	3/1/2024		
Water System Faci	ility and Sampling Point Inve	ntory	
Water	To	tal Lead and	

Water		<u> </u>			Total	Lead and		
	Water System Facility	Sampling Point	Sampling Point		Coliform			Stage
Facility ID		ID	Description	Status	Rule	Rule Tier	Asbestos	WQP 2 DBPF
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		MW001	DAYCARE KITCHEN	Α	Υ	3	Υ	
		MW002	CHILDRENS SINK	Α	Υ	3		
		MW003	STAFF BATHROOM	Α	Υ	3		
		MW004	HOUSE KITCHEN SINK	Α	Υ	3		
		MW005	HOUSE BATHROOM	Α	Υ	3		
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT	3	ENTRY POINT	Α				
10316	WELL	2	WELL	Α				
5/011	DRESSLIDE STORAGE							

10310 WELL	Z VVELL	A	l .		
54911 PRESSURE STORAGE					
	Certified Operat	tor Information			
Water System Facility: DISTRIBU	TION SYSTEM (WSF ID: 00600)			
Facility Classification: SMALL WATER	SYSTEM				Certification
Operator Name	Operator Type	Certification(s)			Expiration
LAFRAMBOISE, PAUL F.	CHIEF OPERATOR	DISTRIBUTION SYST	EM OPERATOR - CLAS	PERATOR - CLASS I 9/	
		WATER TREATMEN	T PLANT OPERATOR - 0	CLASS II	9/30/2021
LAFRAMBOISE, JEFFREY	ASSIGNED OPERATOR	DISTRIBUTION SYST	EM OPERATOR - CLAS	S I	12/31/2020
	Contact In	formation			
Name	Organizatio	n		Job Title	<u> </u>
Ms. Cynthia S. Hall	Red Sneake	rs	Owner		
Mailing Address Line One	Mailing Address Line Two)	City	State	Zip Code

Name				Organization	1			Job Title	
Ms. Cynthia S. Hall				Red Sneaker	S		Owner		
Mailing Address Lin	e One		Mailing Addr	ess Line Two			City	State	Zip Code
312 Village Hill Road	d					Lebanon		СТ	06249
Business Phone	Extension	Fax	Mo	bile Phone	Emergency Phone	Email Add	Iress		
860-456-4118					860-423-7857				
Contact Role(s): Ac	dministrative	Contact, Leg	gal Contact, O	wner					
Name				Organization	1			Job Title	
Mr. Michael A. Hall						(Owner		
Mailing Address Lin	e One		Mailing Addr	ess Line Two			City	State	Zip Code
312 Village Hill Rd						Lebanon		СТ	06249

Contact Role(s): Owner

Extension

Fax

Business Phone

860-456-4118

Mobile Phone

Emergency Phone Email Address

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

	water quarity	Monitoring and	u uon	upi	idifec t	Ciicaai	C	
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0710283	RED SNEAKERS				NTNC	34	Р	GW
Local Address (where applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
312 VILLAGE HI	LL ROAD	Connections	1		1			
		· · · · · · · · · · · · · · · · · · ·			•			· · · · · · · · · · · · · · · · · · ·

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Clas	ssification	Population	Owner Type	Primary Source
CT0719033	HILLANDDALE FARMS CONN, LLC				NTNC	50	Р	GW
Local Address (v	vhere applicable)	Service	Resider	itial	Commercia	al Industri	al Combine	ed Agricultural
400 MACK ROA)	Connections			1			

Towns Served: LEBANON			
	g Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 006	<u> </u>		
Asbestos (1094)	•	1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		·
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/16 - 12/31/18	6/1-9/30	Complete
	1/1/19 - 12/31/21	6/1-9/30	
	1/1/22 - 12/31/24	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Nitrate (1040)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Nitrite (1041)			outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		
Inorganic Chemicals (IOCS)			(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)			(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/16 - 12/31/18	1/1-12/31	Complete

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

	Connecticut I	Department	of Public H	ealth D	rinkii	ng V	Nater S	ection	
		Quality Mor				_			
PWS ID	PWS Name	Quality 14101	ntoring and		assificatio			wner Type Pr	imary Source
CT071903		CONN. LLC			NTNC		50	Р	GW
	lress (where applicable)		Service	Residentia		rcial	Industrial	Combined	Agricultural
400 MACI	* * * * * * * * * * * * * * * * * * * *		Connections		1				
Towns Se	rved: LEBANON								
		Mon	nitoring Requ	irement	:s				
Water Sy	stem Facility: ENTRY PO	NT (WSF ID: 0070	00)						
Pesticid	es, Herbicides and PCBs - I	Phase II & V (SOC	S)				1 routi	ne (RT) per t	hree years
Sam	pling Point (Sampling Point I	D)		Monitoring	Period	Coll	ection Perio	d Complic	ance Status
				1/1/19 - 12,	/31/21				
				1/1/22 - 12,	/31/24				
Organic	Chemicals (VOCS)							1 routine (R	Γ) per year
Sam	pling Point (Sampling Point I	D)	ı	Monitoring	Period	Coll	ection Perio	d Complic	ance Status
ENT	RY POINT (3)			1/1/18 - 12,	/31/18			Cor	mplete
				1/1/19 - 12				Cor	mplete
				1/1/20 - 12	/31/20				
		Other	Compliance	Schedu	les				
Complian	ce Schedule Activity				e Date		Achieve	d Date	
CROSS CC	ONNECTION SURVEY REPORT			3/1	1/2019				
		Public N	lotification R	equirem	ents				
			Compliance	Notice	<u>Public</u>	: Noti	<u>fication</u>	PN Certi	fication
Violation,	/Situation		Period	Tier	Require	ed i	Performed	Due to DPH	Received
	Parameters M&R Violation		7/1/18 - 9/30/18	3	11/30/20		1/23/2019	12/10/2019	1/25/2019
	1&R Violation		7/1/18 - 9/30/18	3	11/30/20		1/23/2019	12/10/2019	1/25/2019
Total Coli	form M&R Violation		7/1/18 - 9/30/18	3	12/19/20		1/22/2019	12/29/2019	1/25/2019
	Wa	ter System Fa	cility and San	npling P	oint In	vent	tory		
Water						Tota	l Lead an	nd	
System	Water System Facility		int Sampling Poi	nt	(Colifo			Stage
Facility IE		ID	Description		Status	Rule	e Rule Ti	er Asbestos	WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION		Α	Υ			
		DOWNSTREA			A	.,			
		MW001	LADIES ROOM		A	Y			
		MW002	MENS ROOM		A	Y			
		MW003	BREAK ROOM		A	Y			
		MW004	UPSTAIRS KIT		A	Y			
00700	ENTRY DOINT	UPSTREAM		VICE CON	Α				
00700	ENTRY POINT	3	ENTRY POINT		Α				
10322	WELL 5A	2	WELL 5		Α				
10323	WELL 4	2	WELL 4		Α				

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

WELL 11

Α

2

49897 WELL 11

53541

COOP

49901 ATM STORAGE TANK AT 40S

49905 PRESSURE TANK AT 40S COOP

BOOSTER PUMP STATION

	Water Quality Monito	oring an	d Con	npl	liance S	Schedul	le	
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
СТ0719033	033 HILLANDDALE FARMS CONN, LLC			NTNC		50	Р	GW
Local Address (where applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
400 MACK ROAD		Connections			1			
Towns Served:	LEBANON							

Connecticut Department of Public Health Drinking Water Section

	ANON									
			Certi	fied Operate	or Information)				
Water System Fac	ility: DISTR	IBUTION SY	YSTEM (\	WSF ID: 00600)						
Facility Classificatio	n: SMALL WA	TER SYSTEM	1						Certification	
Operator Name			Operato	or Type	Certification(s)				Expiration	
LAFRAMBOISE, PAU	L F.		CHIEF OP	ERATOR	DISTRIBUTION SYS	тем оре	RATOR - CLA	SS I	9/30/2021	
					WATER TREATMEN	WATER TREATMENT PLANT OPERATOR - CLASS II				
LAFRAMBOISE, JEFF	REY		ASSIGNED	OPERATOR	DISTRIBUTION SYS	тем оре	RATOR - CLA	SS I	12/31/2020	
				Contact Inf	ormation					
Name				Organization				Job Title		
Kofkoff Egg Farm LL	.c									
Mailing Address Line	e One		Mailing A	ddress Line Two			City	State	Zip Code	
17 Schwartz Rd						Bozrah	·	СТ	06334	
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email A	ddress			
Contact Role(s): Ov	wner									
Name				Organization	1			Job Title		
Mr. Ric Sundal				Kofkoff Egg F	arm LLC		President			
Mailing Address Line	e One		Mailing A	ddress Line Two			City	State	Zip Code	
Law Department, M	s 2500		P.O. Box (64101		St. Paul		MN	55164	
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email A	ddress			
Contact Role(s): Le	gal Contact									
Name				Organization	ı			Job Title		
Mr. David Sumner				Hillanddale E	gg Farms Conn LLC		Mngr Drink	ing Water		
Mailing Address Line	e One		Mailing A	ddress Line Two			City	State	Zip Code	
17 Schwartz Road						Bozrah		СТ	06334	
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email A	ddress			
860-428-9399						dsumne	r@hillandda	lefarms.com		
Contact Role(s): Ac	lministrative	Contact								

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID PWS Name			Cla	ssification	Population	Owner Type	Primary Source	
CT0719053 THE SCOTTS-HYPONEX COMPANY-MAIN PLANT				NTNC	45	Р	GW	
Local Address (where applicable)		Service	Residen	itial	Commerci	al Industri	al Combine	ed Agricultural
ROUTE 207		Connections	1					

Towns Served: LEBANON		'	1
Monitoring Re	quirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)			
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		Complete
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	11/1/18 - 11/30/18		Complete
	12/1/18 - 12/31/18		Complete
	1/1/19 - 1/31/19		Complete
	2/1/19 - 2/28/19		Complete
	3/1/19 - 3/31/19		Complete
	4/1/19 - 4/30/19		
	5/1/19 - 5/31/19		
	6/1/19 - 6/30/19		
	7/1/19 - 7/31/19		
	8/1/19 - 8/31/19		
	9/1/19 - 9/30/19		
	10/1/19 - 10/31/19		
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/18 - 12/31/20	6/1-9/30	
	1/1/21 - 12/31/23	6/1-9/30	
Physical Parameters (PPS)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	11/1/18 - 11/30/18		Complete
	12/1/18 - 12/31/18		Complete
	1/1/19 - 1/31/19		Complete
	2/1/19 - 2/28/19		Complete
	3/1/19 - 3/31/19		Complete
	4/1/19 - 4/30/19		
	5/1/19 - 5/31/19		
	6/1/19 - 6/30/19		
	7/1/19 - 7/31/19		
	8/1/19 - 8/31/19		
	9/1/19 - 9/30/19		
	10/1/19 - 10/31/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Di(2-Ethylhexyl) - Phthalate (2039)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	10/1/18 - 12/31/18		

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Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID PWS Name C			Cla	ssification	Population	Owner Type	Primary Source	
CT0719053 THE SCOTTS-HYPONEX COMPANY-MAIN PLANT				NTNC	45	Р	GW	
Local Address (where applicable)		Service	Resider	itial	Commercia	al Industri	al Combine	ed Agricultural
ROUTE 207		Connections	1					

Monitoring	Requirements		
Water System Facility: ENTRY POINT (WSF ID: 00700)	<u> </u>		
Di(2-Ethylhexyl) - Phthalate (2039)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Pentachlorophenol (2326)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)		1 rout	ine (RT) per quarte
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Pesticides, Herbicides and PCBs-Phase II (SOC2)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Pesticides, Herbicides and PCBs-Phase V (SOC5)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)		1 rout	ine (RT) per quarte
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Other Comp	liance Schedules		
Compliance Schedule Activity	Due Date	Achieved D)ate
	! !		

SUBMIT LEAD CONSUMER NOTICE CERTIFICATE

SANITARY DEFECT CORRECTIVE ACTION PLAN

CROSS CONNECTION EXEMPTION

3/1/2023

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

	<u> </u>							
PWS ID PWS Name C			Cla	ssification	Population	Owner Type	Primary Source	
СТ0719053	THE SCOTTS-HYPONEX COMPANY-MAIN PLA	NT			NTNC	45	Р	GW
Local Address (\	vhere applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
ROUTE 207		Connections	1					

	Wa	ter System Facili	ity and Sampling P	oint Ir	nventoi	у		
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ			
		4-1	Garage	Α	Υ			
		4-5	Sample Bottle #5 Sin	Α	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		MP01	OFFICE KITCHEN SINK	Р	Υ	2		
		MP02	MENS RESTROOM	Р	Υ	2		
		MP03	WOMENS RESTROOM	Р	Υ	2		
		MP04	TANK TAP	Р	Υ	2		
		MP05	MAITENANCE SINK	Р	Υ	2		
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT	3	ENTRY POINT	Α				
10328	WELL 2	2	WELL 2	Α				
60823	TREATMENT PLANT							

60823 TREATMENT PLANT									
Certified Operator Information									
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)									
Facility Classification:			Certification						
Operator Name	Operator Type	Certification(s)	Expiration						
NIGRO, JR., VICTOR N.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2020						
		WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2021						
NIGRO, SCOTT A.	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2019						
		WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2020						
Water System Facility: TREATI	MENT PLANT (WSF ID: 60823)								
Facility Classification: CLASS 1 TRE	EATMENT PLANT		Certification						
Operator Name	Operator Type	Certification(s)	Expiration						
NIGRO, JR., VICTOR N.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2020						
		WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2021						
NIGRO, SCOTT A.	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2019						
		WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2020						
FOURNIER, HENRY	ASSIGNED OPERATOR	SMALL WATER SYSTEM OPERATOR	6/30/2019						
	Contact In	formation							

1 OOKIVIER, HEIVIKI		ASSIGNED OF	TENATOR SIMALE WATER STOTEM OF ERATOR					0/30/2013	
			Co	ntact Inf	ormation				
Name				Organization	า			Job Title	
Mr. Mark D. Cooper				Hyponex Co	rporation	Plant Manager			
Mailing Address Line One Mailing Address				ess Line Two		City	State	Zip Code	
20 Industrial Road						Lebanon		СТ	06249
Business Phone	Extension	Fax	Mo	bbile Phone Emergency Phone Ema			ldress		
860-642-7591	102					mark.cooper@scotts.com			
Contact Role(s): A	dministrative C	ontact, Leg	al Contact						

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID PWS Name Classification Population Owner Type Primary Source CT0719053 THE SCOTTS-HYPONEX COMPANY-MAIN PLANT NTNC 45 P GW Local Address (where applicable) Service Residential Commercial Industrial Combined ROUTE 207		Trator Quality 1101110	911118 6111	0. 0011	ipmemor.	901100101		
Local Address (where applicable) Service Residential Commercial Industrial Combined Agricultural	PWS ID PWS Name			Classification	Population	Owner Type	Primary Source	
	CT0719053 THE SCOTTS-HYPONEX COMPANY-MAIN PLANT				NTNC	45	Р	GW
ROUTE 207 Connections 1	Local Address (where applicable) Se			Resider	ntial Commerc	ial Industri	ial Combin	ed Agricultural
	ROUTE 207		Connections	1				

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0719063 LEBANON MIDDLE SCHOOL				NTNC	415	L	GW	
Local Address (v	vhere applicable)	Service	Residen	itial	Commercia	al Industri	al Combine	ed Agricultural
891 EXETER ROA	AD	Connections	1					

Towns Served: LEBANON			1
Monitoring	g Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00	600)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/16 - 12/31/18	6/1-9/30	Complete
	1/1/19 - 12/31/21	6/1-9/30	
	1/1/22 - 12/31/24	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/17 - 3/31/19		Complete
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
СТ0719063	CT0719063 LEBANON MIDDLE SCHOOL				NTNC	415	L	GW
Local Address (where applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
891 EXETER RO	AD	Connections	1					

Towns Served: LEBANON

Monitoring Requirements

Water System Facility: ENTRY POINT (WSF ID: 00700)

Organic Chemicals (VOCS) 1 routine (RT) per year

Sampling Point (Sampling Point ID) Monitoring Period Collection Period Compliance Status

1/1/20 - 12/31/20

Other Compliance Schedules

Compliance Schedule Activity Due Date Achieved Date

CROSS CONNECTION SURVEY REPORT 3/1/2019

		Water System Facili	ity and Sampling P	oint Ir	nvento	ry		
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule		Asbestos	Stage WQP 2 DBPF
00600	DISTRIBUTION SYSTEM	1 4	DISTRIBUTION SYSTEM	Α	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		MW001	MENS RM FACULTY	Α	Υ			
		MW001-E	MENS ROOM FACULTY	Α	Υ	N	Υ	
		MW002	NURSES OFFICE	Α	Υ			
		MW003	BOYS ROOM 66 WING L	Α	Υ			
		MW004	STAFF ROOM	Α	Υ			
		MW005	FOUNTAIN 56 WING	Α	Υ			
		MW006	KITCHEN POT SINK	Α	Υ			
		MW007	GIRLS ROOM 56 WING R	Α	Υ			
		MW008	GIRLS ROOM 66 WING L	Α	Υ			
		MW009	GIRLS ROOM NEAR CAFE	Α	Υ			
		MW010	BOYS ROOM NEAR CAFE	Α	Υ			
		MW015-G7-8	BOY S ROOM 7TH & 8TH	Α	Υ	N		
		MW017	BATHROOM	Α	Υ	N		
		MW028-TEA	TEACHER S LOUNGE	Α	Υ	N		
		MW031-S	CUSTODIAL SINK	Α	Υ	N		
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT	3	ENTRY POINT	Α				
10329	WELL 1	2	WELL	Α				
53886	WELL 2	2	WELL #2	Α				

53888 HYDROPNEUMATIC STORAGE TANK

Certified Operator Information

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

Water System Facility. Distrib	vater system racinty. Distribution statem (was in. 00000)								
Facility Classification: SMALL WATE	R SYSTEM		Certification						
Operator Name	Operator Type	Certification(s)	Expiration						
LAFRAMBOISE, PAUL F.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	9/30/2021						
		WATER TREATMENT PLANT OPERATOR - CLASS II	9/30/2021						

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

	Water Quality Monitoring and Co				iance S	Schedul	e	
PWS ID PWS Name				Clas	ssification	Population	Owner Type	Primary Source
CT0719063 LEBANON MIDDLE SCHOOL					NTNC	415	L	GW
Local Address (w	Service	Residen	itial	Commerci	al Industri	al Combine	ed Agricultural	
891 EXETER ROA	Connections	1						

Connecticut Department of Public Health Drinking Water Section

Towns Served: LEBANON

			Cer	tified Operato	or Information	1			
Water System Fac	cility: DISTR	IBUTION SY	STEM	(WSF ID: 00600)					
Facility Classification	n: SMALL WA	TER SYSTEM	l						Certification
Operator Name			Oper	ator Type	Certification(s)				Expiration
LAFRAMBOISE, JEFFREY			ASSIGN	IED OPERATOR	DISTRIBUTION SYS	ГЕМ ОРЕ	RATOR - CLAS	SS I	12/31/2020
				Contact Info	ormation				
Name				Organization				Job Title	
Ms. Janet M. Tyler				Lebanon Pub	lic Schools		Superintend	lent	
Mailing Address Line One			Mailing	g Address Line Two			City	State	Zip Code
891 Exeter Road						Lebanor	1	СТ	06249
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	ddress		
860-642-7795 860-642-4589 860-642-7795 jane					janet.tyl	er@lebanon	ct.org		
Contact Role(s): Le	gal Contact								
Name				Organization				Job Title	
Ms. Betsy Petrie				Town of Leba	non		First Selectman		
Mailing Address Lin	e One		Mailing	g Address Line Two			City	State	Zip Code
579 Exeter Road						Lebanor	1	СТ	06249
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	ddress		
860-642-6100		860-642-7	7716			bpetrie@	glebanontow	nhall.org	
Contact Role(s): Le	gal Contact, C	wner							
Name				Organization				Job Title	
Mr. Kevin French				Lebanon Pub	lic Schools		Facilities Dir	ector	
Mailing Address Lin	e One		Mailing	g Address Line Two			City	State	Zip Code
891 Exeter Road						Lebanor)	СТ	06249
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	Email Address		
860-642-5742		860-642-4	1589		860-466-9961	kevin.fre	ench@lebanc	onct.org	

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0719073 PRIDES CORNER FARMHOUSE, INC.				NTNC	50	Р	GW	
Local Address (where applicable)		Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
122 WATERMAI	N ROAD	Connections	1					

Towns Served: LEBANON			
Monitoring	g Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 000	600)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		Complete
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine	(RT) per six months
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	7/1/18 - 12/31/18		Complete
	1/1/19 - 6/30/19		
	7/1/19 - 12/31/19		
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)		1 re	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

	Connectic	ut Dana	rtment o	f Public	Health	Drir	lking	Wate	r Sc	ection	
		•					Ŭ			cuon	
DIAIC ID		ter Quai	ity Moni	toring a	na Con	_				-	D : C
PWS ID	PWS Name	FADRALIOLIC	- INC						n Ow		Primary Source
CT0719073	PRIDES CORNER	FAKIVIHOUSI	E, INC.	Comilee	Dooidon	NT		50	امند	P	GW
	s (where applicable)			Service Connection	Residen	itiai Co	mmercia	l Indust	riai	Combine	d Agricultura
122 WATERN Towns Serve				Connection	ns 1						
Towns Serve	u: LEBANON		041	!!	C . l	11					
			Otner (Complian							
	Schedule Activity					Due Da		Achi	ieved	Date	
SUBMIT LEAI	CONSUMER NOTIC	E CERTIFICAT	E		9	9/28/20	18				
RESPOND TO	SANITARY SURVEY					0/25/20					
CROSS CONN	IECTION SURVEY REP	PORT				3/1/202	20				
		Water Sy	stem Faci	lity and S	ampling	Point	t Inver	ntory			
Water							Tot	tal Lea	d and	I	
	ater System Facility	5	Sampling Poin				Colif		pper		Stage
Facility ID			ID	Description	1	Sta			e Tiei	r Asbesto	s WQP 2 DBPI
00600 D	STRIBUTION SYSTEM		4		ION SYSTEM		۱ ۲	(
		1	DOWNSTREAN	1 WITHIN 5 S	SERVICE CO	N A	A				
			UPSTREAM	WITHIN 5 S	SERVICE CO	N A	4				
00700 EI	NTRY POINT		3	ENTRY POI	NT	A	4				
10335 W	ELL 1		2	WELL 1		A	4				
56617 TI	REATMENT PLANT										
			Certified	l Operato	r Inform	nation	1				
Water Syste	em Facility: TREAT	TMENT PLAI		-							
Facility Class	ification: CLASS 1 TF	REATMENT PL	ANT								Certification
Operator Na	me		Operator Ty	pe	Certification	on(s)					Expiration
NIGRO, JR., \			CHIEF OPERAT		DISTRIBUTI		TEM OPE	RATOR - (CLASS	5 III	6/30/2020
, ,					WATER TREATMENT PLANT OPERATOR - CLASS II						6/30/2021
NIGRO, SCOT	T A.		ASSIGNED OPI	ERATOR						5 I	6/30/2019
					WATER TRI						6/30/2020
			Co	ntact Info							3, 23, 222
Name				Organization	illation					Job Title	
Mr. Mark Se	llew			Pride's Corner	r Farmhouse	<u> </u>		Owner		JOD TILLE	
	ess Line One		Mailing Addre		Tarrinous			City		State	Zip Code
122 Waterm				55 Emic 1 WO			Lebanor			CT	06249
Business P		Fax	Mol	oile Phone	Emergency	/ Phone				Ç,	00 <u>2</u> -13
860-642-7		860-642-4				,					
	(s): Legal Contact, (1				
Name	(-). 0		(Organization						Job Title	!
			`					+		100 1100	

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Mr. Christian Joseph

122 Waterman Road

Business Phone

860-642-3081

Mailing Address Line One

Extension

3013

Contact Role(s): Administrative Contact

Fax

860-642-2027

Schedule Generation Date: 4/11/2019 Page 23

Prides Corner Farms, Inc.

Mailing Address Line Two

Mobile Phone

Facilities Manager

State

City

cjoseph@pridescorner.com

Lebanon

Emergency Phone Email Address

860-642-7535

Zip Code

06268

Connecticut Department of Public Health Drinking Water Section	1
Water Quality Monitoring and Compliance Schedule	

	water quanty womtoring and compliance beneaute								
PWS ID PWS Name C					ssification	Population	Owner Type	Primary Source	
СТ0719073	T0719073 PRIDES CORNER FARMHOUSE, INC.				NTNC	50	Р	GW	
Local Address	(where applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural	
122 WATERMA	AN ROAD	Connections	1						
		*			•	•		· · · · · · · · · · · · · · · · · · ·	

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID PWS Name C			Cla	ssification	Population	Owner Type	Primary Source	
CT0719083 HYPONEX CORPORATION - BAGGING PLANT				NTNC	85	Р	GW	
Local Address (where applicable)		Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
ROUTE 207		Connections	1					

	-		
Towns Served: LEBANON			
Monitoring !	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 0060	00)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		Complete
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/18 - 12/31/20	6/1-9/30	
	1/1/21 - 12/31/23	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Arsenic (1005)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years
			•
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Mater Ovality Manitoring and Complian as Calcadula	epartment of Public Health Drinking Water	
Water Quality Monitoring and Compliance Schedule		
PWS Name Classification Population Owner Type Prima	Classification Population)

PWS ID PWS Name CI			Cla	ssification	Popul	ation	Owner Type	Prin	nary Source	
CT0719083 HYPONEX CORPORATION - BAGGING PLANT				NTNC	85	5	Р		GW	
Local Address (v	vhere applicable)	Service	Resider	ntial	Commerci	al Ind	dustrial	Combine	ed /	Agricultural
ROLITE 207		Connections	1							

Monitoring Requirements										
Water System Facility: ENTRY POINT (WSF ID: 00700)										
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years							
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status							
	1/1/20 - 12/31/22									
Organic Chemicals (VOCS)	1 routine (RT) per quarte									
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status							
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete							
	1/1/19 - 3/31/19		Complete							
	4/1/19 - 6/30/19									

Other Compliance Schedules

7/1/19 - 9/30/19

Compliance Schedule Activity Due Date Achieved Date CROSS CONNECTION SURVEY REPORT 3/1/2020

Water			ty and Sampling P		Total	Lead and		
System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Coliform	Copper	Asbestos	Stage 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ			
		BP01	LABORATORY SINK	Р	Υ	2		
		BP02	LAB RESTROOM	Р	Υ	2		
		BP03	MENS RM LEFT SINK	Р	Υ	2		
		BP04	MENS RM RIGHT SINK	Р	Υ	2		
		BP05	WOMEN S ROOM SINK	Р	Υ	2		
		BP06	WATER TANK	Р	Υ	2		
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT	3	ENTRY POINT	Α				
10338	WELL 1	2	WELL	Α				
50935	BLADDER TANK							

Certified Operator Information

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

Facility Classification: SMALL WATER SYSTEM Certification **Operator Name** Certification(s) **Expiration Operator Type** FOURNIER, HENRY **CHIEF OPERATOR** SMALL WATER SYSTEM OPERATOR 6/30/2019

Contact Information										
Name	Organization			Job Title						
Mr. Mark D. Cooper	Hyponex Corporation			Plant Manager						
Mailing Address Line One	Mailing Addr	Iress Line Two			City	State	Zip Code			
20 Industrial Road				Lebanon		СТ	06249			
Rusiness Phone Extension Fax	Mc	hile Phone	Emergency Phone	Fmail Ac	ldress					

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

		*	nent of Public H Monitoring and			C			
PWS ID	PWS ID PWS Name					Classification Popu		Owner Type	Primary Source
CT0719083	HYPONEX CORE	PORATION - BAGGI	NG PLANT		NTNC		85	Р	GW
Local Address (v	Service	Resident	tial Co	ommerci	al Industri	al Combine	d Agricultural		
ROUTE 207			Connections	1					
Towns Served: I	LEBANON				·				
Dusiness i noi	IC EXCENSION	Tux	Wiodile i Horie Ei	Herberrey	THORE	. Lillaii 7	taar ess		
860-642-759	1 102					mark.c	ooper@sco	tts.com	
Contact Role(s):	Administrative	Contact, Legal Co	ntact						

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section										
	Water Quality Monitoring and Compliance Schedule									
PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source					
CT0710054	FIRST CONGREGATIONAL CHURCH OF LEBANON	NTNC	70	Р	GW					

СТ Local Address (where applicable) Service Residential Commercial Industrial Combined Agricultural Connections 588 EXETER RD 1

Towns Served: LEBANON			<u>'</u>
Monitoring	g Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00	600)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/17 - 12/31/19	6/1-9/30	
	1/1/20 - 12/31/22	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/16 - 12/31/18		Complete
	1/1/19 - 12/31/21		
	1/1/22 - 12/31/24		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/16 - 12/31/18		Complete
	1/1/19 - 12/31/21		
	1/1/22 - 12/31/24		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

		D	'n lle r	r 1.1	D	. 1 .	T.A	7 .	0		
		Department of					_			ction	
	Wate	r Quality Monit	oring an	d Com	_				_		
PWS ID	PWS Name				Class	sificatio	n Pop	ulation	Owr	ner Type P	rimary Source
CT071005		ONAL CHURCH OF LEBAN	ION			NTNC		70		Р	GW
	dress (where applicable)		Service	Residen	tial	Comme	rcial	Industri	al	Combined	Agricultural
588 EXET			Connections			1					
Towns Se	rved: LEBANON										
		Other C	ompliance	Sched	lule	S					
Complian	nce Schedule Activity			L	Due L	Date		Achie	ved I	Date	
CROSS CC	ONNECTION SURVEY REPOR	Т		3	3/1/2	019					
	W	ater System Facili	ity and Sa	mpling	Poi	nt Inv	vento	ory			
Water System Facility II	Water System Facility	Sampling Point ID	Sampling Po	int		C Status	Total Coliforn Rule		per	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	1	KIT 1-BAY PR	EP SINK		A	Υ	1		Υ	
		2	DAY CARE HA			Α	Υ	1	L		
		3	HANDICAP BA	ATH SINK		Α	Υ	1	L		
		4	MENS HAND			Α	Υ	1	L		
		5	WOMENS HA	ND SINK		Α	Υ	1	L		
		DOWNSTREAM	WITHIN 5 SEI	RVICE CON	N	Α					
		UPSTREAM	WITHIN 5 SEI	RVICE CON	N	Α					
00700	ENTRY POINT	3	ENTRY POINT	•		Α					
10309	WELL1	2	WELL1			Α					
51540	PRESSURE STORAGE										
		Certified	Operator	Inform	atio	on					
Water Sy	ystem Facility: DISTRIB	JTION SYSTEM (WSF I	D: 00600)								
Facility C	lassification: SMALL WATE	R SYSTEM									Certification
Operator	Name	Operator Typ	e C	ertificatio	n(s)						Expiration
LAFRAME	BOISE, PAUL F.	CHIEF OPERATO	DR D	ISTRIBUTIO	ON S	YSTEM	OPERA	TOR - CI	_ASS	I	9/30/2021
			W	ATER TRE	ATM	ENT PL	ANT OF	PERATO	R - CL	ASS II	9/30/2021
LAFRAME	BOISE, JEFFREY	ASSIGNED OPER	RATOR D	ISTRIBUTION	ON S	YSTEM	OPERA	TOR - CI	_ASS	l	12/31/2020
		Con	tact Infor	mation							
Name		0	rganization							Job Title	

LAFRAMBOISE, JEFFREY				ASSIGNED OPERATOR DISTRIBUTION SYSTEM OPERATOR - CLASS I 1					12/31/202	
				Contact Inf	ormation					
Name				Organization	1			Job Title		
Mr. Timothy D. Fie	lds			First Cong Ch	nurch of Lebanon		Trustees Ch	nairman		
Mailing Address Lin	e One		Mailing	Address Line Two			City	State	Zip Code	
Chairman, Board of	Trustees		P. O. B	ox 125		Lebanor)	СТ	06249	
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Address				
860-642-6179		860-642-	860-642-7849							
Contact Role(s): Le	egal Contact									
Name				Organization	1	Job Title				
Mr. James E Mc Ca	w			First Cong. L	ebanon	Board of Trustees				
Mailing Address Lin	e One		Mailing	Address Line Two		City		State	Zip Code	
P. O. Box 125			588 Exeter Rd			Lebanor	1	СТ	06249	
Business Phone	ısiness Phone Extension Fax			Mobile Phone	Emergency Phone Email		Email Address			
860-642-6179					860-642-7449	hap/geri@sbcglobal.net				
Contact Role(s): A	dministrative	Contact				•				

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

	water Quanty Monitoring and comphanice senedate										
PWS ID	WS ID PWS Name				ssification	Population	Owner Type	Primary Source			
CT0710054	FIRST CONGREGATIONAL CHURCH OF LEBAN	NTNC		70	Р	GW					
Local Address	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural				
588 EXETER RD		Connections			1						
		•			•			· · · · · · · · · · · · · · · · · · ·			

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule